Institution Name: ________________________________ Agreement #:__________

Prior to Program Agreement approval, provide the following information

1. Estimate data on the ethnic and racial makeup of the population to be served. Please enter the number of individuals, not the percentage of the population to be served.

   **Ethnicity:**
   - _____ Hispanic or Latino
   - _____ Not Hispanic or Latino

   **Race:**
   - _____ American Indian or Alaskan Native
   - _____ Asian
   - _____ Black or African American
   - _____ Native Hawaiian or Other Pacific Islander
   - _____ White

2. Describe the efforts to be used to assure that minority populations have an equal opportunity to participate.

3. Describe efforts to be used to contact minority and grassroots organizations about the opportunity to participate.

4. List any Federal agencies currently providing financial support to the institution.

4a. Has the Institution ever been found to be in noncompliance by those Federal agencies?